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# THE FORGE FOR FAMILIES 2021 Annual Report

The Forge for Families' mission is to holistically equip families to fulfill their Godgiven potential. The primary purpose of the Forge is to enrich the spiritual, vocational, and leadership development of inner-city families through Christcentered mentoring, bringing transforming growth to Houston's Third Ward.

Dear Friends,

One of the joys of preparing an annual report is that it gives us the opportunity to look back and be thankful for all that has been accomplished. The past fiscal year was filled with wonderful opportunities and many challenges. Some of the highlights were:

- 87% of our graduating seniors attended college/trade schools or had current job offers
- 0 teen pregnancies for students in our programs
- Programs operated at reduced capacity due to COVID safe distancing guidelines but are returning to full capacity in 2022
- Successfully hosted a Spring golf fundraising event that raised \$211k to support our programs
- Successfully hosted a Fall dinner event A Night Under the Tuscan Sky with performance by Heather Headley that was attended by 350 people and raised \$395k to support our programs
- Prepared and distributed over 900 Boxes of Love (Thanksgiving dinners) throughout the city
- Hosted Holly Jolly Christmas store where 75 families were able to shop for the children. Collected 1,141 toys and 278 gift cards.
- Approximately 300 Volunteers participated at The FORGE during 2021

The following is an overview of The Forge For Families' income and expenses for the fiscal year ended December 31, 2021.

Total Support & Revenue:	\$2,030,041
Program Expenses:	\$ 935,070
Management and General Expenses:	\$ 242,703
Fundraising Expenses:	\$ 132,314
End of Year Net Asset Balance:	\$6,298,247

The Forge For Families is tax-exempt under 501(c)(3) of the Internal Revenue Code. Donations are taxdeductible to the extent allowed by law. Founded in 2005.

**Financial Statements** 

For the Years Ended December 31, 2021 and 2020

Financial Statements For the Years Ended December 31, 2021 and 2020

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Independent Auditors' Report

To the Board of Directors of The Forge for Families, Inc. Houston, Texas

#### **Report on the Audit of the Financial Statements**

#### **Opinion**

We have audited the financial statements of The Forge for Families, Inc. (a Texas nonprofit organization), which comprise the statement of financial position as of December 31, 2021, and the related statement of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of The Forge for Families, Inc. as of December 31, 2021, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

#### **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of The Forge for Families, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about The Forge for Families, Inc.'s ability to continue as a going concern for one year after the date that the financial statements are issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report

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that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of The Forge for Families, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about The Forge for Families, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control–related matters that we identified during the audit.

#### **Other Matter**

The financial statements of The Forge for Families for the year ended December 31, 2020 were audited by another auditor who expressed an unmodified opinion on those statements on July 30, 2021.

Mconnell of Jones

Houston, Texas June 6, 2022

Statements of Financial Position December 31, 2021 and 2020

	2021		2020
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	2,108,122		1,282,036
Pledges receivable	-		16,001
Prepaid expenses	 6,817		4,527
Total current assets	 2,114,939		1,302,564
NONCURRENT ASSETS			
Property and equipment, net	 4,206,830		4,302,582
Total noncurrent assets	 4,206,830		4,302,582
TOTAL ASSETS	\$ 6,321,769	\$	5,605,146
LIABILITIES			
CURRENT LIABILITIES			
Accounts payable	\$ 357	\$	10,297
Credit cards payable	8,028		3,573
Accrued expenses	 15,137		12,983
Total current liabilities	 23,522		26,853
NET ASSETS			
Without donor restrictions	6,194,831		5,473,228
With donor restrictions	 103,416		105,065
Total net assets	 6,298,247		5,578,293
TOTAL LIABILITIES AND NET ASSETS	\$ 6,321,769	\$	5,605,146

Statement of Activities For the Year Ended December 31, 2021

	2021								
		hout Donor estrictions		th Donor		Totals			
<b>REVENUES AND OTHER SUPPORT</b>									
Contributions	\$	692,041	\$	317,946	\$	1,009,987			
Luncheon/events (net of direct benefit to donors of									
\$34,661)		356,454		-		356,454			
Golf tournament (net of direct benefit to donors of									
\$32,604)		178,472		-		178,472			
Year-end letter		364,945		-		364,945			
Rental		9,518		-		9,518			
Summer program		48,992		-		48,992			
After-school		40,497		-		40,497			
Basketball		8,710		-		8,710			
Other		12,466		-		12,466			
Net assets released from restrictions		319,595		(319,595)					
TOTAL REVENUES AND OTHER SUPPORT		2,031,690	<u>.</u>	(1,649)		2,030,041			
EXPENSES									
Program services:									
After-school/educational		276,340		-		276,340			
Summer leadership		186,598		-		186,598			
Athletic discipleship		168,393		-		168,393			
Mountain top		18,511		-		18,511			
Adult discipleship		81,397		-		81,397			
Christmas store		35,428		-		35,428			
Teen programs		168,403				168,403			
Total program services		935,070				935,070			
Supporting services:									
Management and general		242,703		-		242,703			
Fundraising activities		132,314		-		132,314			
Total support services		375,017		-		375,017			
TOTAL EXPENDITURES		1,310,087		-		1,310,087			
CHANGE IN NET ASSETS		721,603		(1,649)		719,954			
NET ASSETS, BEGINNING OF YEAR		5,473,228		105,065		5,578,293			
NET ASSETS, END OF YEAR	\$	6,194,831	\$	103,416	\$	6,298,247			
		·		·					

#### Statement of Activities For the Year Ended December 31, 2020

				2020				
	Wit	hout Donor	Wi	th Donor				
	R	estrictions	Re	strictions		Totals		
<b>REVENUES AND OTHER SUPPORT</b>								
Contributions	\$	1,021,497	\$	274,360	\$	1,295,857		
PPP grant revenue		-		125,200		125,200		
Luncheon/events (net of direct benefit to donors of								
\$2,060)		179,387		-		179,387		
Golf tournament (net of direct benefit to donors of		150 700				152 700		
\$27,813)		152,709		-		152,709		
Year-end letter Rental		287,533 9,628		-		287,533 9,628		
				-				
Summer program After-school		28,373 41,692		-		28,373 41,692		
Basketball		41,092 1,100		-		41,092 1,100		
		1,100 90		-		1,100 90		
Adult program Other		90 9,454		-		90 9,454		
Net assets released from restrictions		9,434 426,750		- (426,750)		9,434		
Net assets released from restrictions		420,750		(420,750)				
TOTAL REVENUES AND OTHER SUPPORT		2,158,213		(27,190)		2,131,023		
EXPENSES								
Program services: After-school/educational		284 463				281 162		
Summer leadership		284,463 202,151		-		284,463 202,151		
Athletic discipleship		138,886		-		138,886		
Facility Services		138,880		-		138,880		
Adult discipleship		87,802		-		87,802		
Volunteer coordination/BridgeBuilder		55,685		-		55,685		
Christmas store		24,154		-		24,154		
Teen programs		162,907		-		162,907		
reen programs		102,007				102,907		
Total program services		975,058				975,058		
Supporting services:								
Management and general		224,804		-		224,804		
Fundraising activities		94,506		-		94,506		
Total support services		319,310				319,310		
TOTAL EXPENDITURES		1,294,368				1,294,368		
CHANGE IN NET ASSETS		863,845		(27,190)		836,655		
NET ASSETS, BEGINNING OF YEAR		4,609,383		132,255		4,741,638		
NET ASSETS, END OF YEAR	\$	5,473,228	\$	105,065	\$	5,578,293		

#### Statement of Functional Expenses For the Year Ended December 31, 2021

	Program Services								S	upport Service	es			
	After-					Volunteer								
	School/Education	Summer	Athletic		Adult	Coordination/		Christmas	Teen	Total Program	Management		Total Support	Total
	nal	Leasership	Discipleship	Mountain Top	Discipleship	BridgeBuilder	Facility Services	Store	Programs	Expenses	and General	Fundraising	Services	Expenditures
Payroll expenses	\$ 130,402	\$ 97,084	\$ 48,091	\$ 18,110	\$ 60,574	\$-	\$-	\$ 30,638	\$ 104,000	\$ 488,899	\$ 201,699	\$ 73,146	\$ 274,845 \$	5 763,744
Awards and incentives	506	-	-	-	-	-	-	-	-	506	-	-	-	506
Bank fees	3,278	1,311	47	-	-	-	-	47	-	4,683	7,024	-	7,024	11,707
Depreciation	58,970	38,752	50,546	-	3,370	-	-	-	16,849	168,487	-	-	-	168,487
Direct intervention	-	-	-	-	8,184			-	-	8,184	-	-	-	8,184
Education	4,524	-	-	-	-	-	-	-	1,350	5,874	-	-	-	5,874
Food	-	-	3,715	140	3,326	-	-	-	2,500	9,681	-	-	-	9,681
Fundraising	-	-	-	-	-	-	-	-	-	-	-	59,168	59,168	59,168
Insurance	18,657	15,325	13,326	-	1,999	-	-	665	16,658	66,630	1,360	-	1,360	67,990
Licensing and compliance	336	362	10	-	-	-	-	-	-	708	-	-	-	708
Network	2,042	766	1,276	-	51	-	-	-	970	5,105	901	-	901	6,006
Office supplies	3,461	1,661	831	-	208	-	-	-	761	6,922	364	-	364	7,286
Permits	1,479	845	-	-	85	-	-	-	105	2,514	-	-	-	2,514
Professional fees	-	-	-	-	-	-	-	-	-	-	29,935	-	29,935	29,935
Program supplies	9,509	8,569	2,817	-	-	-	-	2,873	1,151	24,919	-	-	-	24,919
Referees/coaches	-	-	2,000	-	-	-	-	-	-	2,000	-	-	-	2,000
Repairs and maintenance	17,680	9,583	9,584	-	1,575	-	-	512	10,794	49,728	-	-	-	49,728
Tournament fees	-	-	10,576	-	-	-	-	-	-	10,576	-	-	-	10,576
Training	196	108	47	-	-	-	-	-	-	351	-	-	-	351
Transportation and travel	1,072	17	4,245	-	33	-	-	-	-	5,367	83	-	83	5,450
Uniforms and equipment	-	-	6,209	-	-	-	-	-	-	6,209	-	-	-	6,209
Utilities	20,925	12,006	12,006	-	1,828	-	-	622	13,030	60,417	-	-	-	60,417
Vehicles	2,771	53	2,132	-	107	-	-	53	213	5,329	54	-	54	5,383
Other expenses	532	156	935	261	57	-		18	22	1,981	1,283		1,283	3,264
Total Expenses	\$ 276,340	\$ 186,598	\$ 168,393	\$ 18,511	\$ 81,397	\$ -	\$-	\$ 35,428	\$ 168,403	\$ 935,070	\$ 242,703	\$ 132,314	\$ 375,017 \$	5 1,310,087

Statement of Functional Expenses For the Year Ended December 31, 2020

	Program Services									Support Services				
	A	After-					Volunteer			-			Total	
	Schoo	l/Educatio	Sumer	Athletic	Facility	Adult	Coordination/	Christmas	Teen	Total Program	Management		Support	Total
		nal	Leasership	Discipleship	Services	Discipleship	BridgeBuilder	Store	Programs	Expenses	and General	Fundraising	Services	Expenditures
Payroll expenses	\$	141,362	\$ 113,033	\$ 35,493	\$ 9,558	\$ 68,771	\$ 42,080	\$ 21,417	\$ 110,037	\$ 541,751	\$ 170,692	\$ 68,227	\$ 238,919	\$ 780,670
Awards and incentives		3,352	-	-	-	-	-	-	575	3,927	-	-	-	3,927
Bank fees		475	190	7	-	-	-	7	-	679	16,296	-	16,296	16,975
Community service		-	-	-	-	3,168	-	-	-	3,168	-	-	-	3,168
Contract labor		2,460	-	-	-	-	555	75	990	4,080	-	-	-	4,080
Depreciation		56,367	37,041	48,314	8,052	3,221	8,052	-	-	161,047	1,627	-	1,627	162,674
Education		2,725	-	-	-	-	-	-	-	2,725	-	-	-	2,725
Food		-	-	941	-	953	30	-	889	2,813	-	-	-	2,813
Fundraising		-	-	-	-	-	-	-	-	-	-	12,265	12,265	12,265
Insurance		17,273	17,964	13,819	345	1,382	690	345	17,274	69,092	1,410	-	1,410	70,502
Licensing and compliance		577	465	-	-	-	-	-	-	1,042	-	-	-	1,042
Network		3,234	849	1,698	-	57	113	57	57	6,065	999	-	999	7,064
Office supplies		4,643	2,229	929	-	279	186	-	1,022	9,288	489	-	489	9,777
Permits		1,249	1,249	1,249	-	-	-	-	1,249	4,996	-	-	-	4,996
Professional fees		-	-	-	-	-	-	-	-	-	31,930	-	31,930	31,930
Program supplies		7,801	6,540	2,251	-	6,455	146	2,253	8,909	34,355	-	14,014	14,014	48,369
Referees/coaches		-	-	1,512	-	-	-	-	-	1,512	-	-	-	1,512
Repairs and maintenance		16,777	9,225	11,829	273	1,364	2,805	-	14,577	56,850	-	-	-	56,850
Tournament fees		-	-	2,129	-	-	-	-	-	2,129	-	-	-	2,129
Training		550	327	142	-	22	164	-	147	1,352	857	-	857	2,209
Transportation and travel		1,247	111	1,017	-	-	175	-	-	2,550	337	-	337	2,887
Uniforms and equipment		-	-	4,275	-	-	-	-	-	4,275	-	-	-	4,275
Utilities		15,720	10,617	8,014	782	1,800	359	-	6,321	43,613	-	-	-	43,613
Vehicles		8,251	2,311	4,948	-	330	330	-	335	16,505	167	-	167	16,672
Other expenses		400	-	319	-	-	-	-	525	1,244	-	-	-	1,244
Total Expenses	\$	284,463	\$ 202,151	\$ 138,886	\$ 19,010	\$ 87,802	\$ 55,685	\$ 24,154	\$ 162,907	\$ 975,058	\$ 224,804	\$ 94,506	\$ 319,310	\$ 1,294,368

#### Statements of Cash Flows For the Years Ended December 31, 2021 and 2020

	2021			2020				
CASH FLOWS FROM OPERATING ACTIVITIES:								
Change in net assets	\$	719,954	\$	836,655				
Adjustments to reconcile change in net assets to net cash								
provided by/(used in) operating activities:								
Depreciation		166,686		162,674				
Decrease in pledges receivable		16,001		51,042				
Increase in prepaid expenses		(2,290)		(4,527)				
Decrease in accounts payable		(9,940)		(13,968)				
Increase (decrease) in credit cards payable		4,455		(13,623)				
Increase (decrease) in accrued expenses		2,154		(4,777)				
Decrease in other liabilities-pass through funds		-		(27,652)				
Total adjustments		177,066		149,169				
Net cash provided by operating activities		897,020		985,824				
CASH FLOWS FROM INVESTING ACTIVITIES:								
Purchase of property and equipment		(70,934)		(48,255)				
Net cash used in investing activities		(70,934)		(48,255)				
NET INCREASE IN CASH AND CASH EQUIVALENTS		826,086		937,569				
-		020,000		,51,509				
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	1	1,282,036		344,467				
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$ 2	2,108,122	\$	1,282,036				

Notes to the Financial Statements December 31, 2021 and 2020

#### NOTE 1 – ORGANIZATION

The Forge for Families, Inc. (the "Forge") is a Texas nonprofit corporation formed through the merger of The Refuge Community Development Corporation and Inner City Youth on December 31, 2005.

The primary purpose of the Forge is to enrich the spiritual, vocational, and leadership development of innercity families through Christ-centered mentoring, bringing transforming growth to Houston's Third Ward.

#### NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

**Basis of Accounting** - The financial statements have been prepared in accordance with not-for-profit (NFP) organizations accounting guidance and using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP). Accordingly, these financial statements are prepared on the accrual basis of accounting and present the financial position, results of activities and cash flows for the Forge.

**Financial Statement Presentation** - The Forge presents the financial statements under Financial Accounting Standards Board (FASB) Accounting Standards Update (ASU) 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities*. In accordance with ASU 2016-14, the Forge is required to report information regarding its financial position and activities according to the following net asset classifications.

- Net Assets Without Donor Restrictions Net assets are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Forge. These net assets may be used at the discretion of the Forge's management and oversight committees.
- Net Assets With Donor Restrictions Net assets subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates those resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

**Cash and Cash Equivalents** - The Forge considers cash on hand, cash in banks and money market accounts with an initial maturity of three months or less to be cash and cash equivalents.

**Concentration of Credit Risk** - Financial instruments that potentially subject the Forge to a significant concentration of credit risk consists primarily of cash and cash equivalents. The Forge maintains its cash in financial institutions, which at times exceed the amount insured by the Federal Deposit Insurance Corporation (FDIC). Bank balances are insured by the FDIC up to \$250,000. The amount exceeding the FDIC insured limit as of December 31, 2021 and December 31, 2020 was \$1,561,174 and \$754,110, respectively. Management periodically assesses the financial condition of the financial institutions and believes that any possible credit risk is minimal.

From time-to-time, the Forge receives large pledges and contributions from a small number of donors who may represent a significant portion of recorded pledges and contributions. During 2021 and 2020, one donor accounted for 13% and 19%, respectively, of total contributions.

Notes to the Financial Statements December 31, 2021 and 2020

**Pledges Receivable** - Pledges receivable consist of unconditional promises to give that are expected to be collected in future years. Such receivables are recorded at the present value of their estimated future cash flows. The Forge provides an allowance for uncollectible amounts based on a review of specific account balances and considering historical experience, and accounts receivable are written off when they become uncollectible.

**Property and Equipment** - All vehicles, buildings, building improvements, equipment, and furnishings are presented at cost, if purchased, or fair market value at the date of donation, if donated, less accumulated depreciation. The building and improvements are being depreciated on the straight-line basis over five to forty years. Depreciation of furniture and equipment is computed on the straight-line basis over the estimated useful lives of the assets, generally three to seven years.

Expenditures for improvements greater than \$1,000 are capitalized, and repairs and maintenance are charged to expense as incurred.

**Impairment of Long-Lived Assets** - Long-lived assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. If the carrying amount of the asset exceeds its estimated undiscounted net cash flow, excluding interest, an impairment charge is recognized for the amount by which the carrying amount of the asset exceeds its fair value. The Forge incurred no impairment losses for 2021 and 2020.

**Contributions and Revenue Recognition** - Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions. Contributions that are restricted by the donor are reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognize. All other donor-restricted contributions are reported as net assets with donor restrictions, depending on the nature of restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

All contributions are recognized as revenue when received or unconditionally promised to the Forge. Conditional promises to give are not recognized as revenue until the conditions are substantially met. There were no conditional promises at December 31, 2021 and 2020. Additionally, the Forge may receive donated professional services and donated time to help with the clerical and office work which do not meet the criteria for recognition in the Forge's financial statements. Accordingly, the values of these contributions have not been recorded in the accompanying financial statements.

Contributed property and equipment are recorded at fair value at the date of donation. Contributions with donor-imposed stipulations regarding how long the contributed assets must be used are recorded as net assets with donor restrictions; otherwise, the contributions are recorded as net assets without donor restrictions.

Special events revenue is comprised of an exchange element based upon the direct benefits donors receive and a contribution element for the difference. The Forge recognizes special events revenue equal to the fair value of direct benefits to donors when the special event takes place. The Forge recognizes the contribution element of special event revenue immediately, unless there is a right of return if the special event does not take place.

Notes to the Financial Statements December 31, 2021 and 2020

Program revenue includes, but is not limited to, revenue from after-school and summer programs. For these programs, tuition is paid monthly at which time the revenue is recognized.

**Functional Expense Allocation** - The costs of providing various programs and supporting services have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated among the program and supporting services benefited. Such allocations are determined by management on an equitable basis. The expenses that are allocated include program fees, general and administrative expenses, and facility fees. Program fees are allocated directly to the program they apply to. General and administrative expenses and facility fees are allocated based on salaries, time and effort, and occupied building space.

**Use of Estimates** - The preparation of the financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those assumptions. Significant estimates include, but are not limited to, collectability of pledges receivable and the useful lives of property and equipment.

**Risks and Uncertainties** - During 2020, many countries around the world, including the United States of America, were impacted by the coronavirus (the "virus" or COVID-19) outbreak. While the virus is continuing to evolve, its implications could involve unavailability of personnel, disruptions of supply chains, and reductions in program service fees and contributions, affecting results of operations and cash flows. At this time, management is not aware of any material risk to the Forge's financial statements and cannot quantify the full extent the virus will have on the Forge's financial information.

**Income Taxes** - The Forge is recognized by the Internal Revenue Service (IRS) to be tax-exempt under IRS Code Section 501(c)(3) and similar state provisions. Therefore, no provision has been made for federal and state income taxes in these financial statements.

Uncertain tax positions are recognized in the financial statements only if the position is more-likely-thannot of being sustained upon examination by taxing authorities, based on the technical merits of the position. The Forge did not recognize any interest and penalties related to uncertain tax positions in 2021 and 2020.

**Recently Adopted Accounting Pronouncements** - In May 2014, the FASB issued ASU No. 2014-09, *Revenue From Contracts With Customers (Topic 606)*, establishing a single comprehensive model for entities to use in accounting for revenue arising from contracts with customers. This update provides a five-step analysis in determining when and how revenue is recognized. The new model will require revenue recognition to depict the transfer of promised goods or services to customers in an amount that reflects the consideration an organization expects to receive in exchange for those goods or services and will supersede most of the existing revenue recognition guidance, including industry-specific guidance. This guidance was effective for annual reporting periods beginning after December 15, 2019 for nonpublic entities and as such, the Forge adopted the new standards effective January 1, 2020 using the modified retrospective transition method.

Analysis of various provisions of this standard resulted in no significant changes in the way the Forge recognizes revenue and, therefore, no changes to the previously issued audited financial statements were required. The presentation and disclosures of revenue have been enhanced in accordance with the standard.

Notes to the Financial Statements December 31, 2021 and 2020

In June 2018, the FASB issued ASU 2018-08 – Not-for-Profit Entities (Topic 958): Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made. The amendments require all entities, both donors and recipients, to evaluate whether the resource provider is receiving commensurate value in a transfer of assets transaction and whether contributions are conditional or unconditional. This update will be effective for the Forge's 2021 annual financial statements. No additional disclosures will be required under this standard. The Forge adopted ASU 2018-08 in 2021. The adoption resulted in no impact to the financial statements.

**Recently Issued Accounting Pronouncements** - In February 2016, the FASB issued ASU No. 2016-02, *Leases (Topic 842)*. The ASU will require most leases to be recognized on the statements of financial position as lease assets and lease liabilities and will require both quantitative and qualitative disclosures regarding key information about leasing arrangements. Lessor accounting is largely unchanged. In June 2020, the FASB issued ASU No. 2020-05, *Revenue From Contracts With Customers (Topic 606) and Leases (Topic 842): Effective Dates for Certain Entities*, to defer these standards. Under the deferral for leases rules, private companies and private not-for-profit organizations can apply the standard to fiscal years beginning after December 15, 2021.

In September 2020, the FASB issued ASU No. 2020-07, *Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets.* The ASU requires a not-for-profit organization to present contributed nonfinancial assets as a separate line item in the statements of activities, apart from contributed nonfinancial assets. It also requires a not-for-profit to disclose contributed nonfinancial assets and includes additional disclosure requirements for each category of contributed nonfinancial assets recognized. The ASU is effective for a not-for-profit entity for annual periods beginning after June 15, 2021. Early adoption is permitted.

The Forge is currently evaluating the impact these pronouncements will have on its financial statements and related disclosures.

#### NOTE 3 - AVAILABILITY AND LIQUIDITY

The Forge regularly monitors liquidity required to meet its operating needs. For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Forge considers all expenditures related to its ongoing activities, including youth and adult programs, as well as services undertaken to support those activities, to be general expenditures.

The Forge considers contributions and promises to give that are restricted by donors to certain programs or specific needs, available only to fund those needs, as restricted. Unrestricted donations are considered available to meet cash needs for general expenditures or the ongoing and major programs that are central to its annual operations. The Forge manages its liquidity and reserves following two guiding principles: operating within a balanced budget with a prudent range of financial soundness and stability and maintaining adequate liquid assets to fund near-term operating needs.

The Forge's goal is generally to maintain financial assets to cover a minimum of 30 days of general expenditures. The Forge has a policy to target a year-end balance of reserves of unrestricted, undesignated net assets to meet a minimum of 15 to 30 days of expected expenditures. To achieve these targets, the Forge forecasts its future cash flows and audits its liquidity every other month and monitors its reserves annually. During 2021 and 2020, the level of liquidity and reserves were managed within the policy requirements.

Notes to the Financial Statements December 31, 2021 and 2020

The following table shows the total financial assets held by the Forge at December 31, 2021 and 2020, and the amounts of those financial assets that could readily be made available within one year of the statement of financial position dates to meet general expenditures:

	2021	2020
Cash and cash equivalents	\$ 2,108,122	\$ 1,282,036
Pledge receivable, net	-	16,001
Less: Net assets with donor restrictions to be met in less than		
one year	 (103,416)	 (105,065)
Financial assets available to meet general expenditures over the		
next 12 months	\$ 2,004,706	\$ 1,192,972

#### **NOTE 4 - PLEDGES RECEIVABLE**

The Forge has obtained pledges to be used for general operations. Pledges receivable amounted to \$0 and \$16,001 as of December 31, 2021 and 2020, respectively, and are expected to be collected within one year. At December 31, 2021 and 2020, there were no allowance for doubtful pledges and no bad debt expenses.

#### NOTE 5 - PROPERTY AND EQUIPMENT

Property and equipment consist of the following at December 31:

	2021	2020
Community Center	\$ 5,385,463	\$ 5,385,463
Building improvements	59,029	48,255
Vehicle	103,444	103,444
Machinery and equipment	45,055	6,495
Software	23,400	-
Office equipment	3,195	4,995
	 5,619,586	 5,548,652
Less: Accumulated depreciation	(1,621,967)	(1,455,281)
	 3,997,619	 4,093,371
Land	209,211	209,211
Property and equipment, net	\$ 4,206,830	\$ 4,302,582

Depreciation expense was \$168,486 and \$162,674 in 2021 and 2020, respectively.

Notes to the Financial Statements December 31, 2021 and 2020

#### **NOTE 6 - PASS-THROUGH FUNDS**

During prior years, the Forge was awarded a \$100,000 grant for Hurricane Harvey victims, of which 10% was to be used for administration expenses. Of the remaining amount of \$90,000, the Forge spent \$62,398 on allowed expenditures and, during 2020, \$27,602 were remitted to another 50l(c)(3) organization, per agreement with the original donor. The Forge did not have pass-through funds during fiscal year 2021.

#### NOTE 7 - PAYCHECK PROTECTION PROGRAM (PPP) GRANT

On March 27, 2020, the Coronavirus Aid, Relief, and Economic Security (CARES) Act, was signed into law. One component of the CARES Act was the Paycheck Protection Program (PPP), which provides qualified small businesses and certain tax-exempt organizations with the resources needed to help provide economic relief due to the adverse impact of COVID-19. The PPP is implemented by the U.S. Small Business Administration (SBA) with support from the U.S. Department of the Treasury. On April 17, 2020 the Forge received a PPP loan in the amount of \$125,200. The PPP Loan had an interest rate of 1%.

Under the requirements of the CARES Act, as amended by the PPP Flexibility Act and Consolidated Appropriations Act, 2021, proceeds may only be used for the Forge's eligible payroll costs, or certain other qualified expenses, paid during the covered period following disbursement. Loan payments are deferred beginning on the date of the note and ending 10 months after the last day of the covered period.

The Forge has accounted for the PPP loan in accordance with FASB Accounting Standards Codification 958-605 as a conditional contribution. The Forge initially recorded the amount received as a refundable advance followed by a reduction in the advance and recognition of revenue as the aforementioned conditions are substantially met.

During 2020, the Forge used the entire proceeds for purposes consistent with the PPP, resulting in recognition of the entire loan amount as PPP grant revenue in the accompanying financial statements. In November 2020, the Forge received notice from their lender that the PPP loan had been forgiven and paid in full by the SBA.

#### NOTE 8 - NET ASSETS

Net assets with donor restrictions as of December 31, 2021 and December 31, 2020 were \$103,416 and \$105,065, respectively as show below:

	2021			2020
Net assets with donor restrictions				
Athletic discipleship	\$	9,025	\$	9,025
Capital repairs and purchases		94,391		96,040
Total net assets with donor restrictions		103,416		105,065
Net Assets without donor restrictions		6,194,831		5,473,228
Total net assets	\$	6,298,247	\$	5,578,293

Notes to the Financial Statements December 31, 2021 and 2020

 2021	2020		
\$ 121,226	\$	96,200	
18,128		46,473	
71,648		84,650	
78,697		37,500	
3,456		575	
26,440		36,152	
 -		125,200	
\$ 319,595	\$	426,750	
\$	\$ 121,226 18,128 71,648 78,697 3,456 26,440	\$ 121,226 \$ 18,128 71,648 78,697 3,456 26,440	

#### **NOTE 9 - DEFINED CONTRIBUTION PLAN**

The Forge has a defined contribution plan (the "40l(k) Plan") available to all employees with at least three months of service who meet the age requirement of 18 years. The 401(k) Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974. Under this plan, up to 3% of an employee's contribution each year is matched by the Forge. The Forge's contributions to the 40l(k) Plan totaled \$14,072 and \$15,930 in 2021 and 2020, respectively.

#### **NOTE 10 - RELATED PARTY TRANSACTIONS**

During 2021 and 2020, the Forge received cash donations from members of the Board of Directors amounting to \$305,688 and \$201,033, respectively.

#### **NOTE 11 - SUBSEQUENT EVENTS**

Management has evaluated subsequent events through June 6, 2022 (the date which the financial statements were available to be issued) and no events have occurred from the statement of financial position date through that date, that would impact the financial statements.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY



4828 Loop Central Dr Ste 1000 Houston TX 77081-2222 Phone: 713-968-1600 Fax: 713-968-1601 *WWW.MCCONNELLJONES.COM* 

July 12, 2022

CONFIDENTIAL

The Forge for Families 3435 Dixie Drive Houston, TX 77021

Dear The Forge for Families:

We have prepared the following returns from information provided by you without verification or audit:

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements.

#### **Federal Filing Instructions**

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by November 15, 2022 at:

McConnell & Jones, LLP 4828 Loop Central Dr Ste 1000 Houston, TX 77081-2222

# *Important:* Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

McConnell & Jones, LLP

Form 8879-TE		IRS e-file Signature Authorization for a Tax Exempt Entity	on ∣	OMB No. 1545-0047			
		I, or fiscal year beginning, 2021, and ending		0004			
		Do not send to the IRS. Keep for your records.	,20	2021			
Department of the Treasury Internal Revenue Service	Þ	Go to www.irs.gov/Form8879TE for the latest information	tion.				
Name of filer			EIN or SSN				
THE FO	RGE FOR FA	MILIES	76-04	85959			
Name and title of officer or pe	rson subject to tax	DANA THOMAS					
Dent L Truce of L	Detron and De	EXECUTIVE DIRECTOR		CONTRACTOR OF THE OWNER OWNE			
		turn Information					
Form 5330 filers may enter or 10a below, and the amo	r dollars and cents. ount on that line for	e using this Form 8879-TE and enter the applicable amount For all other forms, enter whole dollars only. If you check t the return being filed with this form was blank, then leave b). But, if you entered -0- on the return, then enter -0- on the	he box on line 1a, 2a, 3 line 1b, 2b, 3b, 4b, 5b,	3a, 4a, 5a, 6a, 7a, 8a, 9a, 6b, 7b, 8b, 9b, or 10b.			
1a Form 990 check h	nere 🚬 🕨 🗶	b Total revenue, if any (Form 990, Part VIII, column (A)					
2a Form 990-EZ che		b Total revenue, if any (Form 990-EZ, line 9)					
3a Form 1120-POL of		b Total tax (Form 1120-POL, line 22)					
4a Form 990-PF che		b Tax based on investment income (Form 990-PF, Pa		4b			
5a Form 8868 check		b Balance due (Form 8868, line 3c)		5b			
6a Form 990-T check		b Total tax (Form 990-T, Part III, line 4)		6b			
7a Form 4720 check		b Total tax (Form 4720, Part III, line 1)					
8a Form 5227 check		b FMV of assets at end of tax year (Form 5227, Item	D)	8b			
9a Form 5330 check		b Tax due (Form 5330, Part II, line 19)	OD Det III Inc 00	9b			
10a Form 8038-CP ch Part II Declarat		b Amount of credit payment requested (Form 8038-C ture Authorization of Officer or Person Subje		10b			
2021 electronic return and complete. I further declare intermediate service provid acknowledgement of recei- of any refund. If applicable entry to the financial institu- financial institution to debi- later than 2 business days payment of taxes to receiv personal identification num <b>PIN: check one box only</b>	accompanying sc that the amount in der, transmitter, or ipt or reason for rej e, I authorize the U. ution account indic it the entry to this a prior to the payme ve confidential infor mber (PIN) as my sig	, (EIN)	and belief, they are true tronic return. I consent t IRS and to receive from processing the return or n electronic funds withd leral taxes owed on this asury Financial Agent at ns involved in the proce- slated to the payment. I	e, correct, and to allow my the IRS (a) an refund, and (c) the date rawal (direct debit) return, and the 1-888-353-4537 no ssing of the electronic have selected a withdrawal.			
with a state age on the return's o X As an officer or return. If I have	ency(ies) regulating disclosure consent person subject to t indicated within thi	21 electronically filed return. If I have indicated within this r charities as part of the IRS Fed/State program, I also author screen. ax with respect to the entity, I will enter my PIN as my sign s return that a copy of the return is being filed with a state my PIN on the return's disclosure consent screen.	prize the aforementioned nature on the tax year 20	ERO to enter my PIN			
Signature of officer or person subje		tora 5 pormer	Date	>7-18-22			
Part III Certifica	ation and Auth	entication					
ERO's EFIN/PIN. Enter ye number (EFIN) followed by		selected PIN. 76299	791555 nter all zeros				
		IN, which is my signature on the 2021 electronically filed re requirements of Pub. 4163, Modernized e-File (MeF) Infor					
ERO's signature 🕨 🚽	nesnom	Date	e ▶ <u>07/12/22</u>				
ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So							
LHA For Privacy act and	d Paperwork Redu	action Act Notice, see instructions.		Form 8879-TE (2021)			
102521 01-11-22							

(Rev. January 2022)

## Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

#### File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	Name of exempt organization or other filer, see instructions.         Ta				Taxpayer identification number (TIN			
print	THE FORGE FOR FAMILIES				76-0485959			
File by the due date filing your	Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.					
return. Se instructior	e	oreign add	ress, see instructions.					
Enter th	ne Return Code for the return that this application is for (file	e a separat	te application for each return)			01		
Applica	ation	Return	Application			Return		
ls For		Code	Is For			Code		
Form 9	90 or Form 990-EZ	01	Form 1041-A			08		
Form 4	720 (individual)	03	Form 4720 (other than individual)			09		
Form 9	90-PF	04	Form 5227			10		
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 9	90-T (trust other than above)	06	Form 8870			12		
Form 9	90-T (corporation) KEVIN TRUESDEL	07						
Tele If the If this box I I I I I I I I I I I I I I I I I I I	books are in the care of ► <u>3435 DIXIE DRIV</u> phone No. ► <u>713-660-1875</u> e organization does not have an office or place of business is is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► request an automatic 6-month extension of time until he organization named above. The extension is for the organization named above. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove. The extension is for the organization have a dove and the organiz	s in the Uni Group Exe and atta <b>NOVEI</b> anization's	Fax No. ►	f this is fo all membe	r the whole of ers the externation organization organization organization of the second	group, check this		
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.	), enter the	tentative tax, less	3a	\$	0.		
-	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and					
	stimated tax payments made. Include any prior year overp			3b	\$	0.		
c B	alance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required, by					
u	sing EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.		
Cautio instruct	n: If you are going to make an electronic funds withdrawal ions.	(direct det	bit) with this Form 8868, see Form 84	153-TE and	d Form 8879	)-TE for payment		
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8	8868 (Rev. 1-2022)		

123841 01-12-22

Form	aan
Form	330

#### EXTENDED TO NOVEMBER 15, 2022 **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.



Dep: Inter	artment of t nal Revenu	the Treasury De Service Go to www.irs.gov/Form990 for instructions and	the latest	information.	Inspection
Α	For the		ending		
В	Check if applicable:	C Name of organization		D Employer identification	ation number
	Address change	THE FORGE FOR FAMILIES			
F	Name	Doing business as		76-048595	9
F	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	2
	Final	3435 DIXIE DRIVE	noom/suite	713-660-1	863
	lreturn/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,097,306.
	Amende			H(a) Is this a group ret	
	Applica-			for subordinates?	
	pending	3435 DIXIE DRIVE, HOUSTON, TX 77021		<b>H(b)</b> Are all subordinates inc	
1	Tax-exer	mpt status: $X = 501(c)(3) = 501(c) ( )  (insert no.) = 4947(a)(1)$	or 527	1	ist. See instructions
		WWW.FORGEFORFAMILIES.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other	I Vear		State of legal domicile: TX
_	-	Briefly describe the organization's mission or most significant activities: $\underline{TO}$ H	OLISTI	CALLY FOUTP	FAMTLITES
e	' U	CO FULFILL THEIR GOD-GIVEN POTENTIAL.	011011		
lan	2 0	Check this box	ed of more	than 25% of its not asse	ate
Activities & Governance	3 1				19
Ő	4 N	lumber of independent voting members of the governing body (Fart VI, line Ta)			19
~	5 T	otal number of individuals employed in calendar year 2021 (Part V, line 2a)			28
ties	6 T	otal number of volunteers (estimate if necessary)			300
iti		otal number of volumeers (estimate in necessary)			0.
Ac		let unrelated business taxable income from Form 990-T, Part I, line 11			0.
			<u></u>	Prior Year	Current Year
	<b>8</b> C	Contributions and grants (Part VIII, line 1h)		2,040,686.	1,977,123.
ne	9 P	•		75,765.	98,199.
Revenue	<b>10</b> Ir	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		259.	0.
Be	11 C	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-9,586.	-94,186.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,107,124.	1,981,136.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	15 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		780,668.	750,766.
Expenses	16a P	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Den	b T	otal fundraising expenses (Part IX, column (D), line 25) <b>83, 4</b>	09.		•••
Ĕ	17 0	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		489,801.	497,438.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,270,469.	1,248,204.
		Revenue less expenses. Subtract line 18 from line 12		836,655.	732,932.
or				ginning of Current Year	End of Year
ets (	1 1 1 20 ⊤	otal assets (Part X, line 16)		5,605,146.	6,321,769.
Assets	<b>∃</b> 21 ⊤	otal liabilities (Part X, line 26)		26,853.	10,544.
Net,		let assets or fund balances. Subtract line 21 from line 20		5,578,293.	6,311,225.

Part II Signature Block

T.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date						
Here	DANA THOMAS, EXECUTIVE DI	IRECTOR							
	Type or print name and title								
	Print/Type preparer's name Pre	pare signature Date 07/12	Check PTIN						
Paid	TENE THOMAS	Jene Momer 07/12	/22 self-employed P00849229						
Preparer	Firm's name 🕒 MCCONNELL & JONES I	LP	Firm's EIN 🕨 76-0488832						
Use Only	Firm's address 🖕 4828 LOOP CENTRAL I	DRIVE SUITE 1000							
	HOUSTON, TX 77081		Phone no. 713-968-1600						
May the I	May the IRS discuss this return with the preparer shown above? See instructions								
132001 12-0	32001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2021)								

rai	1990 (2021) THE FORGE FOR FAMILIES	76-0485959	Page
	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		L
1	Briefly describe the organization's mission:		
	TO HOLISTICALLY EQUIP FAMILIES TO FULFILL THEIR GOD-GIVEN	POTENTIAL.	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	XN
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XN
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as n	neasured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 276,340. including grants of \$ ) (Revenu	e\$ 40,	497.
	THE AFTER-SCHOOL ENRICHMENT PROGRAM SERVED APPROXIMATELY		
	CHILDREN DURING THE TWO SCHOOL YEARS 2020-2021 AND 2021-2		-
	PROGRAM'S PRIMARY OPERATION IS FROM 3:00PM - 6:30PM MONDA		
	FRIDAY DURING THE SCHOOL YEAR. HOWEVER, DUE TO COVID-19 W		ED
	OUR AFTER-SCHOOL PROGRAM INTO AN ALL-DAY ACADEMY CALLED		
	ESSENTIAL-COVID-19 ACADEMY THAT OPERATED FROM 8:00AM - 5:	30PM MONDAV	_
	THURSDAY. THE MAINSTAY OF THE PROGRAM IS TO BECOME AN EXT		
	CLASSROOM BY PROVIDING HOMEWORK HELP AND TUTORING IN MATH		
	COMPUTER-BASED READING AND MATH ASSESSMENT SOFTWARE IS US		
			κ <u>ε</u>
	AND ASSESS PROGRESS THROUGHOUT THE YEAR. PARENTAL INVOLVE	IMENT 15	
	ENCOURAGED THROUGH VOLUNTEERING.		
	106 500	10	
4b	(Code:) (Expenses \$186,598. including grants of \$) (Revenue (Code:)) (Revenue (Code: Code:)) (Revenue (Code:)) (Revenue (Code:)) (Revenue (Code: Code:)) (Revenue (Code:)) (Revenue (Code:)) (Revenue (Code:)) (Revenue (Code:)) (Revenue (Code: Code:)) (Revenue (Code: _		992.
	THE FORGE SUMMER CLUB SERVED OVER 61 STUDENTS FOR 8 WEEKS		
	SUMMER. THE GOAL WAS TO PROVIDE STUDENTS A FUN EXPERIENCE		
	MEETING THE PRACTICAL CHILD CARE NEEDS FOR PARENTS. DAILY		
	CONSISTED OF ORGANIZED TEAM SPORTS ACTIVITIES, ACADEMIC I		
	CHARACTER DEVELOPMENT, AND WEEKLY FIELD TRIPS. THE ACADEM		
	ACTIVITIES WERE DESIGNED TO HELP STUDENTS RETAIN WHAT THE	EY HAD LEARN	ED
	DURING THE SCHOOL YEAR.		
4c	(Code: ) (Expenses \$ 168,392. including grants of \$ ) (Revenu	e\$ <b>8</b> ,	710.
4c		e\$8, NAL BASKETB	
4c	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER	NAL BASKETB	
4c	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAM	NAL BASKETB	
4c	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAM TEAMS COMPETE IN LOCAL, REGIONAL, AND OUT OF TOWN TOURNAM	NAL BASKETB	ALL
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4c	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAN TEAMS COMPETE IN LOCAL, REGIONAL, AND OUT OF TOWN TOURNAN HOURS.	NAL BASKETB	ALL
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	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER         LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAN         TEAMS COMPETE IN LOCAL, REGIONAL, AND OUT OF TOWN TOURNAN         HOURS.	NAL BASKETB	ALL
4d	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER         LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAN         TEAMS COMPETE IN LOCAL, REGIONAL, AND OUT OF TOWN TOURNAN         HOURS.	NAL BASKETB IS. THE AAU IENTS WITHIN 21,984.)	ALL 5
4c 4d 4e	THE FORGE ATHLETIC DISCIPLESHIP PROGRAM INCLUDES AN INTER         LEAGUE FOR YOUTH AGES 5-10, AND THREE AAU BASKETBALL TEAN         TEAMS COMPETE IN LOCAL, REGIONAL, AND OUT OF TOWN TOURNAN         HOURS.	NAL BASKETB IS. THE AAU IENTS WITHIN 21,984.)	ALL

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 Form 990 (2021)
 THE FORGE FOR FAMILIES

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
-	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
h	Part VI	11a	- 13	
D		11b		х
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			- 23
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
~~	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		<u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or demostic approximation of the second secon	<b>0</b> 4		х
120000	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I. Parts I and II</i>	21	990	2021)
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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
2.14	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		- 23
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
05 -	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of pactice 512(b)(12)2. (III) a mean of the 0-to of the 0-body to	35b		
36	within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?	350		
30	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
0.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par		-		
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a1	_		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	<u>)</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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_		1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 28			
L.	filed for the calendar year ending with or within the year covered by this return		04	х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	~	
2-	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to $e$ -file. See instructions		3a		x
		~	3b		
	If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to <i>line 3b, provide an explanation on Schedule</i> ( At any time during the calendar year, did the organization have an interest in, or a signature or other an		30		
чa	financial account in a foreign country (such as a bank account, securities account, or other financial ac		4a		x
h	If "Yes," enter the name of the foreign country		та		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR)			
5a			5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for \$75 made partly as a contribution and	vices provided to the payor?	7a		Х
			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ntract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizat	ion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
0	Section 501(c)(7) organizations. Enter:	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
1	Section 501(c)(12) organizations. Enter:	1			
	Gross income from members or shareholders	<u>11a</u>	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b	•		
	Enter the amount of reserves on hand	13c	44-		X
		- 0	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> Is the erganization subject to the section 4060 tax on payment(c) of more than \$1,000,000 in remuner		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerative payment(s) during the year?		45		x
	excess parachute payment(s) during the year?		15		
IE	If "Yes," see the instructions and file Form 4720, Schedule N.	incomo?	16		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes " complete Form 4720. Schedulo O		16		
17	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in a				
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		

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 Part VI
 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	Section A. Governing Body and Management	
	Check if Schedule O contains a response or note to any line in this Part VI	

	_
X	

1-	Enter the number of voting members of the governing body at the end of the tax year	1a	19		Yes	N(
Id	If there are material differences in voting rights among members of the governing body at the end of the tax year					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	19			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
2				2		X
3	Did the organization delegate control over management duties customarily performed by or under the			2		- 23
3				3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9	00 was filed?		4		X
	Did the organization make any significant changes to its governing documents since the profit form a Did the organization become aware during the year of a significant diversion of the organization's ass			<u>4</u> 5		X
5 6				<u> </u>		X
о 7а	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap			0		- 23
7a	more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockholders, or				
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the following	:			
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	hed at the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X
bec <sup>.</sup>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code )				
		<u>, ondo oodo.)</u>			Yes	N
0a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
				10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a		X
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	201010 IIIIIg III				
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? $f = \gamma$			120		
U	on Schedule O how this was done	,		12c	х	
13				13	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva			17		
5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	by independer				
~	The organization's CEO, Executive Director, or top management official			15a		X
				15b		X
D	Other officers or key employees of the organization			150		- 23
6-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	ent with a				
JUd				16a		X
<b>۲</b>	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		 n	104		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		ווכ			
				16b		
	exempt status with respect to such arrangements?			100		
	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ TX					
17 10	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	d 000 T (agatia	~ F01(a)(2)a	0.01.1)		bla
8	for public inspection. Indicate how you made these available. Check all that apply.	iu 990-1 (Sectio	11 50 1(0)(3)5	orny)	avalla	bie
0		on Schedule O	·	finer		
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	milict of interest	policy, and	nnano	Jai	
~	statements available to the public during the tax year.	La avail i				
20	State the name, address, and telephone number of the person who possesses the organization's book KEVIN TRUESDEL, BUSINESS MANAGER - 713-660-1875	ks and records	►			
	3435 DIXIE DRIVE, HOUSTON, TX 77021					
	<u>5455 DIAIL DRIVE, MOODION, IN 77021</u>					

1a (	Com	

Form 990 (2021)

THE FORGE FOR FAMILIES Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

#### Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

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Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

		l	mzu			ipen	our			(5)
(A)	(B)			(( Pos	<b>C)</b> ition			(D)	(E)	(F)
Name and title	Average		not cl	heck	more	than o		Reportable	Reportable	Estimated
	hours per		, unles cer an					compensation	compensation	amount of
	week (list any	or					,	from the	from related organizations	other compensation
	hours for	direct				_		organization	(W-2/1099-MISC/	from the
	related	e or (	stee			Isated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	m per		1099-NEC)	1000 1120/	and related
	below	dual 1	Institutional trustee	-	mplo	est co oyee	er			organizations
	line)	Individual trustee or director	n stit	Officer	Key employee	Highest compensated employee	Former			0
(1) DANA L THOMAS	40.00									
EXECUTIVE DIRECTOR/BOARD MEMBER		х		х				147,380.	0.	33,751.
(2) DAN ZOCH	2.00									
CHAIRMAN		X		Х				0.	0.	0.
(3) BLAKE WEBSTER, SR.	2.00									
VICE CHAIRMAN		X		Х				0.	0.	0.
(4) PAUL PRUETT	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) JEFFREY BARTLETT	2.00									
BOARD MEMBER		Х						0.	0.	0.
(6) MARK P CASTIGLIONE	2.00									
BOARD MEMBER		Х						0.	0.	0.
(7) PASTOR DZ COFIELD	2.00									
BOARD MEMBER		Х						0.	0.	0.
(8) DEBBIE L. COSBY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(9) LANCE E DARDIS	2.00									
BOARD MEMBER		Х						0.	0.	0.
(10) WILL FRANKLIN	2.00									
BOARD MEMBER		Х						0.	0.	0.
(11) CHARIC M. JELLINS	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) FRANK C. MEYER	2.00									
BOARD MEMBER		Х						0.	0.	0.
(13) JOHN T. PIPER	2.00									
BOARD MEMBER		Х						0.	0.	0.
(14) WARREN SPENCER	2.00									
BOARD MEMBER		Х						0.	0.	0.
(15) CHRIS D. WEEKLEY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(16) KERRY WILLOUGHBY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(17) NATHAN M. WYNNE	2.00									
BOARD MEMBER		Х						0.	0.	0.
132007 12-09-21										Form <b>990</b> (2021)

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Form 990 (20	D21) THE FORGE	E FOR FA	MI	LI	ES					76-04	485	959	P	age <b>8</b>
Part VII	Section A. Officers, Directors, Trus		ploy	ees,			ghes	t C	ompensated Employee	s (continued)				
	<b>(A)</b> Name and title	(B) Average hours per week	box offic	not cl , unles	ss per	ition more son is	than c s both r/trust	an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n	am	(F) stimate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)		fr orga and	pensa om th anizat d relat anizati	e ion ed
(18) MARK		2.00			0	<u>×</u>	1.0		_					
BOARD MEME		2 00	Х						0.		0.			0.
(19) CLINT BOARD MEME		2.00	x						0.		0.			0.
			•											
			•											
			-											
1b Subtot									147,380.		0.	3:	3,7	
	rom continuation sheets to Part VI add lines 1b and 1c)	I, Section A							0. 147,380.		0.	3	3,7	<u>0.</u> 51.
	umber of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	9			1
	H												Yes	No
	e organization list any <b>former</b> officer, ? If "Yes," complete Schedule J for s			•	•	-		Ŭ	• •			3		х
4 For any	y individual listed on line 1a, is the su	im of reportabl	e co	mpe	ensat	tion	and	oth	ner compensation from t	ne organization			v	
	ated organizations greater than \$150 y person listed on line 1a receive or a	,										4	X	
	ed to the organization? If "Yes." com	plete Schedule	e J fo	or su	ich r	bers	on .		-			5		Х
	Independent Contractors ete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	actor	s th	nat received more than \$	100.000 of com	pensat	ion fro	om	
-	janization. Report compensation for	-												
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	С	(C omper		n

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Form **990** (2021)

Pa	rt VI		Statement of Rev	venue						
			Check if Schedule O c	contains a	response	or note to any line	e in this Part VIII			
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
<u>រ</u> រ រ	1 ;	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts					1b					
Ū.	(		Fundraising events		1c	967,136.				
äifts ar A	(				1d					
s, Bilio	(	е	Government grants (contri	ibutions)	1e					
rion	1	f	All other contributions, gifts,	grants, and						
ibut			similar amounts not included	above	1f	1,009,987.				
ontr of O	9	g	Noncash contributions included in I	lines 1a-1f	1g \$					
<u>ठ</u> ह	I	h	Total. Add lines 1a-1f	<u></u>	<u></u>		1,977,123.			
	_					Business Code	40.000	40,000		
ice	2 6		SUMMER PROGRAM			624410	48,992.	48,992.		
ue v			AFTERSCHOOL PROGRAM ATHLETIC PROGRAM			624410 624410	40,497. 8,710.	40,497. 8,710.		
ven S ven	(		AIRDETIC FROGRAM			024410	8,710.	0,710.		
gra Re		d e								
Program Service Revenue	1		All other program service r	revenue						
			Total. Add lines 2a-2f				98,199.			
	3		Investment income (includ				·			
			other similar amounts)							
	4		Income from investment o							
	5		Royalties		<u></u>	<b>&gt;</b>				
				(	i) Real	(ii) Personal				
	6 8	а	Gross rents	6a	9,518.					
	I		Less: rental expenses	6b	0.					
			Rental income or (loss)	6c	9,518.		0.510	0.510		
			Net rental income or (loss)				9,518.	9,518.		
	7 8		Gross amount from sales of		ecurities	(ii) Other				
			assets other than inventory Less: cost or other basis	7a						
e			and sales expenses	7b						
enu			Gain or (loss)	70 7c						
Revenue			Net gain or (loss)	· · ·		▶				
<u>ب</u>	8 8	a	Gross income from fundraisir	ng events (r	not					
Othe				967,136.						
			contributions reported on	line 1c). S	ee					
			Part IV, line 18		8a	0.				
	1		Less: direct expenses			116,170.				
			Net income or (loss) from t		-	····· ►	-116,170.			-116,170.
	9 8		Gross income from gaming							
			Part IV, line 19							
			Less: direct expenses Net income or (loss) from g							
			Gross sales of inventory, le							
	10.1		and allowances							
			Less: cost of goods sold							
			Net income or (loss) from s		······					
			. ,		,	Business Code				
sno	11 ;	а	OTHER INCOME			900099	12,466.	12,466.		
ane		b								
leve		С								
Miscellaneous Revenue			All other revenue							
	(		Total. Add lines 11a-11d				12,466.	100.100		
	12		Total revenue. See instructio	ons	<u></u>	►	1,981,136.	120,183.	0.	-116,170.
13200	9 12-0	)9-2	21							Form <b>990</b> (2021)

THE FORGE FOR FAMILIES

Form 990 (2021)

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Form 990 (2021)
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THE FORGE FOR FAMILIES Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in t (A)	his Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	181,131.	63,396.	117,735.	
6	Compensation not included above to disgualified	101,151.		117,755.	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	569,635.	425,503.	70,986.	73,146.
8	Pension plan accruals and contributions (include	,			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	29,935.		29,935.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	7,286.	C 000	264	
13	Office expenses	/,280.	6,922.	364.	
14	Information technology				
15	Royalties				
16 17		5,450.	5,367.	83.	
17 18	Travel Payments of travel or entertainment expenses	5,450.	5,507.	0.5.	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	168,487.	168,487.		
23	Insurance	67,990.	66,630.	1,360.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
а	amount, list line 24e expenses on Schedule 0.)	60,417.	60,417.		
a b	REPAIRS AND MAINTENANCE	49,728.	49,728.		
c	PROGRAM SUPPLIES	24,919.	24,919.		
d	BANK FEES	11,707.	4,683.	7,024.	
	All other expenses	71,519.	59,018.	2,238.	10,263
25	Total functional expenses. Add lines 1 through 24e	1,248,204.	935,070.	229,725.	83,409
26	Joint costs. Complete this line only if the organization	-	-		-
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fight if following SOP 98-2 (ASC 958-720)				

11

132010 12-09-21

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2021.04000 THE FORGE FOR FAMILIES

Form 990 (2021)

		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,282,036.	1	2,108,123.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			16,001.	3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualit					
		under section 4958(f)(1)), and persons described				6	
Ś	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges			4,527.	9	6,817.
		Land, buildings, and equipment: cost or other	I I		1 -	-	
		basis. Complete Part VI of Schedule D	10a	5,830,597.			
	ь	Less: accumulated depreciation	10b	5,830,597. 1,623,768.	4,302,582.	10c	4,206,829.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			5,605,146.	16	6,321,769.
	17	Accounts payable and accrued expenses			10,297.	17	357.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20					20	
	21	Escrow or custodial account liability. Complete I		Г		21	
	22	Loans and other payables to any current or form				21	
Liabilities		trustee, key employee, creator or founder, subst		· · · · · · · · · · · · · · · · · · ·			
bili		controlled entity or family member of any of these				22	
Lia	23	Secured mortgages and notes payable to unrela	-			23	
	24	Unsecured notes and loans payable to unrelated		Г		24	
	25	Other liabilities (including federal income tax, pa		Г		27	
	20	parties, and other liabilities not included on lines					
		of Schedule D	,		16,556.	25	10,187.
	26				26,853.	26	10,544.
	20	Organizations that follow FASB ASC 958, che				20	
es		and complete lines 27, 28, 32, and 33.					
Ŭ	27				5,473,228.	27	6,207,809.
3ala	28				105,065.	28	103,416.
Ыd	20	Organizations that do not follow FASB ASC 9			,	20	
Ъц		and complete lines 29 through 33.	00, 0110				
p	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or ec				30	
<b>A</b> ss	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			5,578,293.	32	6,311,225.
Ž	33	Total liabilities and net assets/fund balances			5,605,146.	33	6,321,769.
	00	I UTAL HADINITES AND HEL ASSELS/ MINU DAIANCES			5,005,1100	33	0,001,000

THE FORGE FOR FAMILIES

Form **990** (2021)

Form 990 (2021)

Part X | Balance Sheet

	1 990 (2021) THE FORGE FOR FAMILIES	76-04	85959	Paç	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,981		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,248	<u> </u>	
3	Revenue less expenses. Subtract line 2 from line 1	3	732		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,578	, 29	<u>93.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,311	, 22	25.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

132012 12-09-21

Department of the Treasury Internal Revenue Service

(Form 990)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2021
Open to Public Inspection

#### Name of the organization

Name of the organization Employer identification numb									identification number			
			FORGE FOR I						6-0485959			
Par	tl	Reason for Public (	Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	s.				
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)												
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)										
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).					
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,			
_		city, and state:										
5 [		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
г		section 170(b)(1)(A)(iv). (Complete Part II.)										
6 L		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 [	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
. F		section 170(b)(1)(A)(vi). (Complete Part II.)										
8 L		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9 [		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college										
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
10		An organization that norma		than 22 1/20/ of its supp	ort from o	ontribution	n momborob	in food on	d aroog regeinte from			
		activities related to its exem										
		income and unrelated busir		•	. ,			••	•			
		See section 509(a)(2). (Con				SCS acqui		Janization e				
11 [		An organization organized a	. ,	vely to test for public sa	fetv See	section 50	)9(a)(4).					
12		An organization organized a	-	•	•			rrv out the	purposes of one or			
-		more publicly supported or	-	-	-			•				
			-									
а		lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving										
		the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting										
		organization. You must c	complete Part IV, Se	ctions A and B.								
b		<b>Type II.</b> A supporting organization supervised or controlled in connection with its supported organization(s), by having										
		control or management of the supporting organization vested in the same persons that control or manage the supported										
		organization(s). You mus	-									
с		<b>Type III functionally integrated.</b> A supporting organization operated in connection with, and functionally integrated with,										
		its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.										
d		Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s)										
		that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.										
		- · ·	,	•								
е		Check this box if the orga functionally integrated, or					турет, туре	п, туре п				
f	Ente	r the number of supported of		any integrated supporting	0 0							
		ide the following information	•									
		) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	fmonetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)			
Total							1		1			

#### THE FORGE FOR FAMILIES

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support										
Calendar year (or fiscal year beginning in) 🕨		(a) 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	1283269.	1045211.	1139810.	2040686.	1977123.	7486099.				
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge	100000	1045011	1120010	2040606	1077100	740000				
	Total. Add lines 1 through 3	1283269.	1045211.	1139810.	2040686.	1977123.	7486099.				
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)						644,906.				
6	Public support. Subtract line 5 from line 4.						6841193.				
	tion B. Total Support						0041195.				
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total				
	Amounts from line 4	1283269.	1045211.	1139810.	2040686.	1977123.	7486099.				
	Gross income from interest,										
•	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	26,866.	22,501.	18,653.	9,887.	9,518.	87,425.				
9	Net income from unrelated business			-							
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)										
11	Total support. Add lines 7 through 10						7573524.				
12	Gross receipts from related activities, etc. (see instructions)										
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	vear as a section 5	01(c)(3)					
_	organization, check this box and stop										
	tion C. Computation of Publi					<b>I</b> I					
	Public support percentage for 2021 (I					14	90.33 % 96.23 %				
	Public support percentage from 2020 Schedule A, Part II, line 14										
16a							► V				
	stop here. The organization qualifies		•								
D	33 1/3% support test - 2020. If the c										
47-	and <b>stop here.</b> The organization qual										
17a	10% -facts-and-circumstances test										
	and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization										
h	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or										
U	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the										
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization										
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions											
	Schedule A (Form 990) 2021										

#### THE FORGE FOR FAMILIES

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support				1		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support			-		- <b>-</b>	
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)			1			
	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second. third.	fourth, or fifth tax	vear as a section !	501(c)(3) organ	nization,
	check this box and stop here	U U					·
Sec	tion C. Computation of Publi						, <u> </u>
	Public support percentage for 2021 (I			column (f))		15	%
	Public support percentage from 2020					16	%
	tion D. Computation of Inves					• •	-
	Investment income percentage for 20			ine 13. column (f))		17	%
18	Investment income percentage from					18	%
	<b>33 1/3% support tests - 2021.</b> If the						
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2020. If the	-	-				3%, and
	line 18 is not more than 33 1/3%, che	•					·
20	Private foundation. If the organization						
	3 01-04-22						lule A (Form 990) 2021
			16	5			- •

THE FORGE FOR FAMILIES

1

Yes No

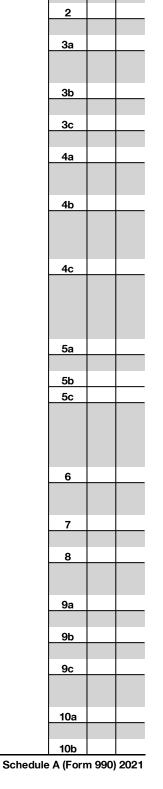
#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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#### THE FORGE FOR FAMILIES Schedule A (Form 990) 2021

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			

supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised	<u>l. or controlled the supportin</u>	ng organization.
Section C. T	ype II Supporting Org	ganizations

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed 1 the supported organization(s).

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used	l to satisfy the	e Integral Part Test d	uring the year	see instructions).
-					

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

c 🗌		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental entit	v (see instruction <u>s)</u>	).
-----	--	---	-------------------------	------------------------------------	------------------------------	----

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 132025 01-04-22

3b Schedule A (Form 990) 2021

2a

2b

3a

Part IV Supporting Organizations (continued)

18

Yes No

1	Check here if the organization satisfied the Integral Part Test as a qualifyin		,	Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E. (A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
		· · ·		-

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2021

132026 01-04-22

Schedule A (Form 990) 2021 Part V

THE FORGE FOR FAMILIES Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Schedule A (Form 990) 2021

### THE FORGE FOR FAMILIES

0010		, •	CICCICI Tayor
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (c	ontinued)	
Sect	ion D - Distributions		Current Year
_1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported		
	organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive		
	(provide details in Part VI). See instructions.	8	

9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(ii) Underdistributior Pre-2021	IS	(iii) Distributable Amount for 2021	
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
c	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
<u>i</u>	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

Form 990) 2021				FAMILIES			76-0485959	Page
line 1; Part IV, Section A, lines	s 1, 2, 3b, 3c, D, lines 2 and	4b, 4c, 5a 3; Part IV	, 6, 9a, Sectio	9b, 9c, 11a, 11b, n E, lines 1c, 2a, :	and 11c; Part I 2b, 3a, and 3b;	V, Section B, line Part V, line 1; Pa	a or 17b; Part III, line 12; s 1 and 2; Part IV, Section rt V, Section B, line 1e; F	on C, Part V,
 Section D, lines 5, 6, ar (See instructions.)	id 8; and Par	t v, Sectio	n E, line	s 2, 5, and 6. Als	o complete this	part for any add	tional information.	

Schedule A

## Identification of Excess Contributions Included on Part II, Line 5

76-0485959

2021

# \*\* Do Not File \*\* \*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
	510,000.	358,530
	381,000.	229,530
	202,286.	50,816
	157,500.	6,030
otal Excess Contributions to Schedule A, Part II, Line 5		644,906

## Schedule B

#### (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one)

Schedule of Contributors

► Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2021

Employer identification number

76-0485959

	THE	FORGE	FOR	FAMILIES

erganization type (check of	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

#### Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year  $\dots$  b \$

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

THE FORGE FOR FAMILIES

76-0485959

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$40,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$61,037.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>50,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <b>40,000.</b>	Person X Payroll Noncash
123452 11-1	1-21		(Complete Part II for noncash contributions.) Schedule B (Form 990) (2021)

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2021.04000 THE FORGE FOR FAMILIES

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Schedule B (Form 990) (202 <sup>-</sup>
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Name of organization

Employer identification number

76-0485959

#### THE FORGE FOR FAMILIES

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	

25

#### 13400712 783345 100000265.2100

2021.04000 THE FORGE FOR FAMILIES

Schedule I	B (Form 990) (2021)			Page 4
Name of o	rganization			Employer identification number
THE FO	ORGE FOR FAMILIES			76-0485959
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	through (e) and the following line er charitable, etc., contributions of <b>\$1,000 or</b>	ntry. For organizations	hat total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of git	 ft	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	Insferor to transferee
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gi	ft	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	Insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held
		(e) Transfer of gi	 ft	
	Transferee's name, address, ar	ld ZIP + 4	Relationship of tra	Insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gi	 ft	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	insferor to transferee

123454 11-11-21

Schedule B (Form 990) (2021)

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						0.40.51	45.00.17
(Forr	<b>HEDULE D</b> n 990)	Complete if the org Part IV, line 6, 7, 8, 9, 10	al Financial Statements anization answered "Yes" on Form 990, 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			OMB No. 15	21
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest information.			Open to Inspecti	
	e of the organizat					entification	
Pa	rt I Organiz		d Funds or Other Similar Funds or A	ccour			
	organizatio	on answered "Yes" on Form 990, Part IV, lir	ne 6.			·	
			(a) Donor advised funds	(b) Fun	ids and o	other accou	nts
1	Total number at e	nd of year					
2		of contributions to (during year)					
3		of grants from (during year)					
4		at end of year					
5			writing that the assets held in donor advised fun	ds			
	-		exclusive legal control?		Ľ	Yes	No No
6			advisors in writing that grant funds can be used o				
	for charitable pur	poses and not for the benefit of the donor o	or donor advisor, or for any other purpose confer	ring			
	impermissible priv	vate benefit?	•••••••••••••••••••••••••••••••••••••••		[	Yes	No No
Pa	rt II Conserv	vation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part IV	, line 7.			
1		servation easements held by the organizati					
	Preservatio	n of land for public use (for example, recrea	ation or education) Preservation of a hist	orically	importar	nt land area	ı
	Protection of	of natural habitat	Preservation of a cert	ified his	storic stri	ucture	
	Preservatio	n of open space					
2			fied conservation contribution in the form of a co	onserva	tion ease	ement on th	ie last
	day of the tax yea					the End of th	
а	Total number of c	onservation easements		2a			
b				2b			
с	Number of conse	rvation easements on a certified historic str	ucture included in (a)	2c			
d			after 7/25/06, and not on a historic structure				
	listed in the Natio	nal Register		2d			
3			leased, extinguished, or terminated by the organ	ization	during th	ne tax	
	year 🕨						
4	Number of states	where property subject to conservation ear	sement is located				
5	Does the organiza	ation have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and en	forcement of the conservation easements i	t holds?		C	Yes	No
6			handling of violations, and enforcing conservation			uring the ye	ear
	▶						
7	Amount of expension	ses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	isemen	ts during	the year	
	►\$						
8	Does each conse	rvation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B	)(i)			
	and section 170(h	n)(4)(B)(ii)?			E	Yes	No No
9	In Part XIII, descri	be how the organization reports conservati	on easements in its revenue and expense staten	nent an	d		
	balance sheet, an	d include, if applicable, the text of the foot	note to the organization's financial statements th	at desc	ribes the	•	
		counting for conservation easements.					
Pa	rt III Organiz	ations Maintaining Collections o	f Art, Historical Treasures, or Other S	Simila	r Asset	ts.	
	Complete	if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization	n elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and bal	ance sł	neet worł	٨S	
	of art, historical tr	easures, or other similar assets held for pul	blic exhibition, education, or research in furthera	nce of I	public		
	service, provide ir	Part XIII the text of the footnote to its final	ncial statements that describes these items.				

b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,
	provide the following amounts relating to these items:
	(i) Revenue included on Form 990, Part VIII, line 1

	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	rovid	e
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1	►	\$
b	Assets included in Form 990, Part X		\$
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990) 2021

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Par	t III Organizations Maintaining Co	ollections of Ar	t, Historical Tr	easures, o	r Other S	Similar	Assets	contin	ued)	
3	Using the organization's acquisition, accessio	n, and other record	s, check any of the	e following that	make sigi	nificant us	se of its			
	collection items (check all that apply):									
а	Public exhibition	c	I 📃 Loan or ex	change progra	am					
b	Scholarly research	e	e 🗌 Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	how they further	the organizatio	on's exemp	ot purpose	e in Part	XIII.		
5	During the year, did the organization solicit or	-	-	-	-					
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang						Part IV,	line 9, or		
	reported an amount on Form 990, Parl		0							
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for contributio	ns or other ass	sets not in	cluded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a									
								Amount	:	
с	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for escrow or o	custodial acco	unt liability	/?		Yes		No
	If "Yes," explain the arrangement in Part XIII.									]
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" on F	orm 990, Part	IV, line 10	).				
		(a) Current year	(b) Prior year	(c) Two year	rs back (d	<b>d)</b> Three ye	ars back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (	a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Term endowment	6								
	The percentages on lines 2a, 2b, and 2c should	lld equal 100%.								
3a	Are there endowment funds not in the posses	sion of the organiza	ation that are held a	and administer	ed for the	organizat	ion	_		
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizat							3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Par	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990	), Part IV, line 11a.	See Form 990	, Part X, lir	ne 10.				
	Description of property	(a) Cost or o		st or other	• •	cumulated	ł	(d) Bool	k value	е
		basis (investr	,	s (other)	depr	reciation				
1a	Land									11.
	Buildings		492.		1,5	39,14	1.	3,905	5,3	51.
с	Leasehold improvements									
d	Equipment		050.			16,03				17.
	Other					68,59			3,25	
Tota	. Add lines 1a through 1e. (Column (d) must ed	ual Form 990, Part	X. column (B). line	10c.)				4,200	5,82	29.
						-		- /-		

Schedule D (Form 990) 2021

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	OR FAMILIES	/(	5-0485959 Page
Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990. Part IV. line	11b. See Form 990. Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
1) Financial derivatives			,
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)(G)			
(H)			
iotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.	L		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
	l on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
Part IX         Other Assets.           Complete if the organization answered "Yes"	l on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
Part IX         Other Assets.           Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" (a)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" (a)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX         Other Assets.           Complete if the organization answered "Yes"           (a)           (1)           (2)           (3)           (4)           (5)           (6)           (7)           (8)		11d. See Form 990, Part X, line 15.	(b) Book value
Part IX         Other Assets.           Complete if the organization answered "Yes"           (a)           (1)           (2)           (3)           (4)           (5)           (6)           (7)           (8)           (9)	Description		(b) Book value
Part IX         Other Assets.           Complete if the organization answered "Yes"         (a)           (1)         (a)           (2)         (a)           (3)         (b)           (4)         (c)           (5)         (c)           (6)         (c)           (7)         (a)           (7)         (c)           (6)         (c)           (7)         (c)	Description		(b) Book value
Part IX         Other Assets.           Complete if the organization answered "Yes"           (a)           (1)           (2)           (3)           (4)           (5)           (6)           (7)           (8)           (9)           Total. (Column (b) must equal Form 990, Part X, col. (B) line           Part X         Other Liabilities.	Description		
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes"	Description		
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .       (a) Description of liability	Description		
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .         (a) Description of liability         (1) Federal income taxes	Description		5. (b) Book value
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE	Description		
Part IX       Other Assets. Complete if the organization answered "Yes"         (a)       (a)         (1)       (a)         (2)       (a)         (3)       (a)         (4)       (b)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes"         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE         (3) ACCRUED EXPENSE	Description		(b) Book value 8 , 028
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE	Description		(b) Book value 8 , 028
Part IX       Other Assets. Complete if the organization answered "Yes"         (a)       (a)         (1)       (a)         (2)       (a)         (3)       (a)         (4)       (b)         (5)       (c)         (6)       (c)         (7)       (a)         (8)       (c)         (9)       (c)         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE         (3) ACCRUED EXPENSE         (4)	Description		(b) Book value 8 , 028
Part IX       Other Assets.         Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         otal. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE         (3) ACCRUED EXPENSE         (4)         (5)	Description		(b) Book value 8 , 028
Part IX       Other Assets. Complete if the organization answered "Yes"         (a)         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         fotal. (Column (b) must equal Form 990, Part X, col. (B) line         Part X         Other Liabilities.         Complete if the organization answered "Yes"         .         (a) Description of liability         (1) Federal income taxes         (2) CREDIT CARDS PAYABLE         (3) ACCRUED EXPENSE         (4)         (5)         (6)	Description		(b) Book value 8 , 028

X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

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Sche	edule D (Form 990) 2021 THE FORGE FOR FAMILIES				0465959 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	2,097,306.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d			116,170.		
е				2e	116,170.
3	Subtract line <b>2e</b> from line <b>1</b>			3	1,981,136.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	4b			
b				4c	0.
b C	Add lines <b>4a</b> and <b>4b</b>				
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I. line 12.)			5	1,981,136.
5				1 ¥ 1	1,981,136. n.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I. line 12.)	tements With		1 ¥ 1	n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Stat	<b>tements With</b> e 12a.	Expenses per F	1 ¥ 1	1,981,136. n. 1,364,374.
5 Pa	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	<b>tements With</b> e 12a.	Expenses per F	Retur	n.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)         rt XII Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements	tements With	Expenses per F	Retur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	tements With 12a.	Expenses per F	Retur	n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	tements With ⇒ 12a. 2a 2b	Expenses per F	Retur	n.
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a           2b           2c	Expenses per F	Retur	n. <u>1,364,374</u> .
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)         Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other (Describe in Part XIII.)       Other (Describe in Part XIII.)	2a           2b           2c           2d	Expenses per F	Retur	n. <u>1,364,374.</u> 116,170.
5 Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other (Describe in Part XIII.)       Add lines 2a through 2d	2a         2b         2c         2d	Expenses per F	1	n. <u>1,364,374</u> .
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Stat</b> Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a         2b         2c         2d	Expenses per F	1 2e	n. <u>1,364,374.</u> 116,170.
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>rt XII</b> Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	tements With ⇒ 12a. 2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,364,374.</u> 116,170.
5 Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Stat</b> Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other losses       Other losses         Other losses       Bart XIII.)         Add lines 2a through 2d       Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:       Investment expenses not included on Form 990, Part VIII, line 7b	2a         2b         2c         2d	Expenses per F	1 2e	n. <u>1,364,374.</u> 116,170.
5 Pa 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Stat</b> Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a         2b         2c         2d         4a         4b	Expenses per F	1 2e	n. <u>1,364,374.</u> <u>116,170.</u> 1,248,204. 0.
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Stat</b> Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other losses       Other (Describe in Part XIII.)         Add lines 2a through 2d       Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:       Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)       Other Inter 1       Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a         2b         2c         2d         4a         4b	Expenses per F	1 2e 3	n. <u>1,364,374.</u> <u>116,170.</u> 1,248,204.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FORGE IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) TO BE

TAX-EXEMPT UNDER IRS CODE SECTION 501(C)(3) AND SIMILAR STATE PROVISIONS.

THEREFORE, NO PROVISION HAS BEEN MADE FOR FEDERAL AND STATE INCOME TAXES

IN THESE FINANCIAL STATEMENTS.

UNCERTAIN TAX POSITIONS ARE RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF

THE POSITION IS MORE-LIKELY-THAN-NOT OF BEING SUSTAINED UPON EXAMINATION

BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE

30

FORGE DID NOT RECOGNIZE ANY INTEREST AND PENALTIES RELATED TO UNCERTAIN

TAX POSITIONS IN 2020 AND 2021.

132054 10-28-21

Schedule D (Form 990) 2021 THE FORGE FOR FAMILIES	76-0485959 Page 5
Schedule D (Form 990) 2021         THE FORGE FOR FAMILIES           Part XIII         Supplemental Information (continued)	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
	116 100
DIRECT FUNDRAISING EXPENSE	116,170.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
TARI XII, HINE 2D OTHER ADOUDIMENTS.	
DIRECT FUNDRAISING EXPENSE	116,170.
132055 10-28-21	Schedule D (Form 990) 2021

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76-0485959 Page 5

SCHEDULE G	Suppleme	ities	OMB No. 1545-0047					
(Form 990)	2021							
Department of the Treasury		Open to Public						
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for instr	uction	s and	the latest information	on.	Employer is	Inspection lentification number
Name of the organization		GE FOR FAMILIES					76-048	
	ing Activities.	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
a 📃 Mail solicitat	ions email solicitations tations		tion of tion of	non-g gover	overnment grants			
key employees list	ed in Form 990, Pa highest paid indiv	or oral agreement with any individual art VII) or entity in connection with p <i>r</i> iduals or entities (fundraisers) pursu organization.	rofessi	onal fi	undraising services?		<b>Y</b>	es No
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	tò (o	Amount paid or retained by fundraiser ted in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization
			Yes	No				
Total								
3 List all states in whi or licensing.	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e	exempt from	registration
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for Form 9	990 or	990-E	Z.		Schedu	lle G (Form 990) 2021
132081 10-21-21								

THE FORGE FOR FAMILIES

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraicing event contributions and gross income on Form 990-F7 lines 1 and 6h. List events with gross ainta graatar than \$5 000

		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				YEAR END		(add col. (a) through
			FALL EVENT	GIVING LETTE	1	col. (c)
٩			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	391,115.	364,945.	211,076.	967,136.
	2	Less: Contributions	391,115.	364,945.	211,076.	967,136.
	2	Cross income (line 1 minus line 2)				
_	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Se	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses		596.	38,972.	116,170.
	10	Direct expense summary. Add lines 4 through				116,170.
		Net income summary. Subtract line 10 from li				-116,170.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	15 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
			/ ( /			
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No
b	lf "	No," explain:				
		ere any of the organization's gaming licenses re Yes," explain:				Yes No
b		103, Opplain.				
					<u> </u>	
13208	2 10	-21-21			Sche	dule G (Form 990) 2021

Schedule G (Form 990) 2021 THE FORGE FOR FAMILIES 76-	0485959	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	No No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility		<u>%</u> %
<ul><li>b An outside facility</li><li>14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:</li></ul>	130	70
Name		
Address		
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	🗌 No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount		
of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party:		
c in res, enter name and address of the tillio party.		
Name 🕨		
Address		
16 Gaming manager information:		
Name		
Gaming manager compensation 🕨 💲		
Description of services provided 🕨		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	L Yes	└── No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, ,	
132083 10-21-21 Sche 34	dule G (Form	990) 2021

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13400712 783345 100000265.2100

Part IV Supplemental information (continued)		
132084 11-18-21		Schedule G (Form 990)
	35	

2021.04000 THE FORGE FOR FAMILIES

10000021

SC	HEDULE J	Compensation Information		I	OMB No.	1545-00	47		
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highe	t		20	<b>91</b>			
		Compensated Employees	00		20		1		
Dena	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line Attach to Form 990.	23.		Open to Public				
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest informat	on.		Inspection				
Nan	ne of the organizatio	n	E		identificati		mber		
		THE FORGE FOR FAMILIES		76-0	)48595	9			
Pa	rt I Question	s Regarding Compensation							
						Yes	No		
1a	Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed on	<sup>:</sup> orm 99	90,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or o	charter travel	ersona	al use					
	Travel for com			dence					
		cation and gross-up payments							
	Discretionary	spending account Personal services (such as maid, ch	uffeur,	chef)					
b	•	on line 1a are checked, did the organization follow a written policy regarding payment of	٢			37			
-	•				<u>1b</u>	X			
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directo				v			
	trustees, and office	ers, including the CEO/Executive Director, regarding the items checked on line 1a?			2	X	<u> </u>		
~	la dia statu dai ala 16 a.								
3		ny, of the following the organization used to establish the compensation of the organization of the							
		ector. Check all that apply. Do not check any boxes for methods used by a related orga	lization	το					
	·	ation of the CEO/Executive Director, but explain in Part III.							
	Compensation								
		compensation consultant	ion oor	nmittoo					
		ther organizations Approval by the board or compensations	ION CON	nmillee					
4	During the year, did	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
-	organization or a re								
а		be payment or change-of-control payment?			4a		x		
b		ceive payment from a supplemental nonqualified retirement plan?					x		
c		ceive payment from an equity-based compensation arrangement?			4c		x		
_	-	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	,								
	Only section 501(	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compe	sation						
	contingent on the r								
а	-				5a		X		
		zation?					X		
		or 5b, describe in Part III.							
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compe	sation						
	contingent on the r	net earnings of:							
а	The organization?				6a		X		
b		zation?					X		
	If "Yes" on line 6a of	or 6b, describe in Part III.							
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payr							
		nes 5 and 6? If "Yes," describe in Part III			7		X		
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	to the						
					8		X		
9		lid the organization also follow the rebuttable presumption procedure described in							
		n 53.4958-6(c)?	<u></u>						
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.		Scheo	dule J (Forr	n 990	) 2021		

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Schedule J (Form 990) 2021

#### 76-0485959

Page 2

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DANA L THOMAS	(i)	113,380.	0.	34,000.	26,000.	7,751.	181,131.	0.
EXECUTIVE DIRECTOR/BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### PART I, LINE 1A:

#### EXECUTIVE DIRECTOR, DANA THOMAS, RECEIVED \$34,000 IN HOUSING ALLOWANCE.

Schedule J (Form 990) 2021

SCHEDULE L	-	<b>Fransaction</b>	ns V	Vith	Int	erested	P	ersons			ON	ИВ No.	1545-00	047
(Form 990)		he organization an	swere	d "Yes	" on F	orm 990, Par	t IV,	line 25a, 25b, 2	6, 27,	28a,		2	02	)1
						art V, line 38a r Form 990-E2		40b.			0	لے pen T		
Department of the Treasury Internal Revenue Service	► Go	o to www.irs.gov/Fe						est information.				spect		ЛС
Name of the organization											ident		on nı	ımber
Dort I Exoco Po		GE FOR FAM			50	4/ \//		501()(20)			859	59		
		actions (section 5 answered "Yes" on												
1		(b) Relationship bet									<u>.</u>	(d)	Corre	ected?
(a) Name of disqualifie	ed person	person and o	rganiza	ation		(4	c) D	escription of tran	sactic	n			es	No
												_		
												+	-	
												+		
2 Enter the amount of ta section 4958	,	0	0		•	•	0	,		r c				
3 Enter the amount of ta		e 2, above, reimburs								► \$				
					- -									
		Interested Pers												
	-	answered "Yes" on 990, Part X, line 5, 6			, Part V	V, line 38a or F	orm	n 990, Part IV, line	e 26; (	or if th	e orga	nizatio	on	
(a) Name of	(b) Relation		(d) Lo	oan to or	(6	e) Original	(1	i) Balance due	(g	<b>)</b> In	<b>(h)</b> Ap	proved	(i) V	Vritten
interested person	with organiz			m the ization?		cipal amount	`	,	defa	ault?	bý bo comm	ard or littee?	agre	ement?
			То	From					Yes	No	Yes	No	Yes	No
														+
														+
														+
														<b> </b>
														+
														+
Total	A • •	<b>D</b>	<u></u>			> \$								
		Benefiting Inter												
(a) Name of intereste		answered "Yes" on (b) Relationship				<b>c)</b> Amount of		(d) Type	of		(e	) Purp	inse r	
		interested pers	son an			assistance		assistan			•	assist		,
		-												
LHA For Paperwork Red	luction Act Not	 ice_see the Instruc	tions	for For	m 990	) or 990-E7				Sche		(For	n 990	) 2021

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	ORGE FOR				76-0485	959	Page <b>2</b>	
Part IV Business Transactions Involv								
Complete if the organization answered						(a) Sh	aring of	
(a) Name of interested person		hip betwe nd the org	en interested anization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
						Yes	No	
BRIDGET THOMAS	WIFE OF	DANA	THOMAS	64,100.	SALARY, RET		X	
Part V Supplemental Information.								
Provide additional information for resp	onses to questi	ions on Sc	hedule L (see i	instructions).				
SCH L, PART IV, BUSINESS T	'RANSACT'	LONS	INVOLVIN	IG INTERESTE	ED PERSONS:			
(A) NAME OF PERSON: BRIDGE	т тномая	2						
(A) NAME OF TERSON: DRIDGE		5						
(D) DESCRIPTION OF TRANSAC	TION: SA	ALARY,	RETIRE	MENT PLAN				
SCH L, PART IV, BUSINESS T	RANSACT	LONS		IG INTERESTE	D PERSONS:			
(A) NAME OF PERSON: BRIDGE	T THOMAS	5						
		-						
(B) RELATIONSHIP BETWEEN I	NTEREST	ED PEF	RSON AND	ORGANIZATI	ION: WIFE OF			
DANA THOMAS, EXECUTIVE DIR	ECTOR							
(C) AMOUNT OF TRANSACTION	\$60.165							
	<del>,,,,</del> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
(D) DESCRIPTION OF TRANSAC	TION: SA	ALARY,	, RETIRE	MENT AND FF	RINGE BY THE			
ORGANIZATION								
(E) SHARING OF ORGANIZATIO			- NO					
(E) SHARING OF ORGANIZATIO	IN KEVUEI							
					Schedule L	Form 90	90) 202 <sup>.</sup>	
132132 11-02-21					Conodulo E			

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number 76-0485959

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORGE FOR FAMILIES

REVIEWED BY THE EXECUTIVE DIRECTOR, WHO IS AN OFFICER, THE BUSINESS

MANAGER, AS WELL AS BY THE FINANCE COMMITTEE TO ENSURE CONSISTENCY WITH THE

AUDIT RESULT.

FORM 990 PART VI SECTION B, LINE 12C:

TO ENSURE THAT THE CORPORATION OPERATES IN A MANNER CONSISTENT WITH ITS

CHARITABLE PURPOSES AND THAT IT DOES NOT ENGAGE IN ACTIVITIES THAT COULD

JEOPARDIZE ITS STATUS AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX,

PERIODIC REVIEWS SHALL BE CONDUCTED. CONFLICTS OF INTEREST ARE ADDRESSED

WHEN THEY ARISE.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

41

FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS NOT CHANGED EITHER ITS OVERSIGHT PROCESS OR

SELECTION PROCESS DURING THE TAX YEAR

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 11-11-21

Schedule O (Form 990) 2021

2021.04000 THE FORGE FOR FAMILIES